PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax (571)-273-2885

| appropriate. All further i | correspondence includir od below or directed oth | ng the Patent, advance o | a) specifying a new corre | maintenance fees v spondence address; | vill be r and/or | nailed to the current (b) indicating a sepa | correspondence address as arate "FEE ADDRESS" for |
|--|--|--|--|--|-----------------------|--|---|
| . 23117 NIXON & VAI | 7590 02/12 NDERHYE, PC LEBE ROAD, 11TH | Fee pap hav | Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below. | | | | |
| | | 128 | | | | | (Depositor's name) |
| | | CAT & TH | ADEMINE | | | | (Signature) |
| | | | | | | | (Date) |
| APPLICATION NO. FILING DATE | | | FIRST NAMED INVENTOR | | ATTORNEY DOCKET NO. | | CONFIRMATION NO. |
| 10/512,094 10/21/2004 | | | Mauro Marzi 2818-224 8572 | | | | |
| TITLE OF INVENTION | | N 20 OF CAMPTOTHE | CINS | | | | |
| APPLN. TYPE | SMALL ENTITY | ISSUE FEE DUE | PUBLICATION FEE DUE | PREV. PAID ISSU | E FEE | TOTAL FEE(S) DUE | DATE DUE |
| nonprovisional | NO | \$1440 | \$300 | \$0 | | \$1740 | 05/12/2008 |
| EXAMINER ART UNIT | | | CLASS-SUBCLASS |] | | | |
| AULAKH, C | CHARANJIT | 1625 | 514-283000 | _ | | | |
| Change of correspondence address or indication of "Fee Address" (37 CFR·1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. | | | 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. | | | | |
| PLEASE NOTE: Universely universel | less an assignee is iden h in 37 CFR 3.11. Com GNEE CAU INDUSTRIE CO NAZIONALE F | tified below, no assigned pletion of this form is NO FARMACEUTICHE PER LO STUDIO | (B) RESIDENCE: (CIT RIUNITE S.p.A E LA CURA DEI | patent. If an assign assignment. Y and STATE OR (• TUMORI | COUNT Rome Rome | RY) , Italy , Italy | document has been filed for |
| | | | 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) ☐ A check is enclosed. ☐ Payment by credit card. Form PTO-2038 is attached. ☐ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 14=1140 (enclose an extra copy of this form). | | | | |
| | s SMALL ENTITY stat | rus. See 37 CFR 1.27. | b. Applicant is no lo | • | | | CFR 1.27(g)(2). the assignee or other party in |
| Authorized Signature | | | k Office. | 05/07/2030 SZEUDIE2 6088059 10512094 | | | |
| Typed or printed nam | | R. Crawford CFR 1.311. The informat | ion is required to obtain or | Reģištrātion 5 | No | 25,327 | 1449.63 OP 399.68 OP nd by the USPTO to process |
| an application. Confiden | tiality is governed by 3: | 5 U.S.C. 122 and 37 CFF | 1.14. This collection is e | stimated to take 12 | minutes | to complete, includi | nd by the USPTO to processing gathering, preparing |

an application. Confidentiality is governed by 35 0.3C. 12 and 37 11-15. In Schedule is estimated to be a submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to contain this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, 10-20. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.